FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	ORM 1 (See instructions)		Office use only
1. NAME OF COMMITTEE (in	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5
Friends of Jeb	Hensarling	111111111	
	1111111111	1 1 1 1 1 1 1 1 1 1 1	
ADDRESS (number and	PO Box 820504		
(Check if address is changed)	Dallas		TX 75382 _ 0504
		CITY▲	STATE▲ ZIP CODE ▲
cfs@talentpay			1
			<u> </u>
	PAGE ADDRESS (URL)		
www.jebhens	ariing.com 		
COMMITTEE'S FAX N 8662072622	UMBER		
2. DATE 0.8	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
3. FEC IDENTIFICA	TION NUMBER	C C00370650	
4. IS THIS STATEM	ENT NEW (N) OF	X AMENDED (A)	
I certify that I have exami	ned this Statement and to the best of my	knowledge and belief it is true, correct a	nd complete
Type or Print Name of	Treasurer James C. Cha	ndler	
Signature of Treasurer	Electronically Filed by <b>James</b>	C. Chandler	Date 08 / DD / YYYYY
NOTE: Submission of fall	•	may subject the person signing this State	tement to the penalties of 2 U.S.C. S437g. WITHIN 10 DAYS
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530	